

Process Name: Benefits Administration	Process Identifier: BA
Sub-Process Name: Vendor Payments	Sub-Process Identifier: BA-6

Sub-Process Purpose and Objectives: Process payments to vendors for insurance premiums collected and administrative fees. **Sub-Process Description**: On a monthly basis, TIS reads the participant database to determine payments to vendors. The payments may be one of two types:

- Premiums Premiums collected by the State on behalf of the vendor
- Administrative Fees Based on the agreement with vendors for processing claims, etc.

Reimbursements of claims paid by vendors that support the State's self-insurance program are processed when the vendor presents detail of claims paid (Currently Aetna, John Deere, and United Behavioral Health). Other vendors (currently Blue Cross) write claim checks on State check stock and the bank accounts are replenished by Treasury on demand.

Premiums collected during the month are reconciled by Insurance Accounting using TIS reports and forwarded to fully insured vendors.

Insurance prepares journal entries for the STARS disbursement process (typically via ACH). Vendors are provided documentation to support payments.

Sub-Process Trigger(s):

Monthly processing

Key Sub-Process Participants:

- Vendors
- Insurance

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Input	Format	Volume/Time	Suppliers
TIS participant information	TIS database		Insurance
Claims paid	Paper reports	1/vendor	Vendor

Outputs:

Output	Format	Volume/Time	Recipients
Supporting reports	Report	1 set per month	Vendors

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Premiums collected reports Journal Vouchers for premiums paid, administrative fees, and claims paid	Reports Online entry	1 set per month 15/month	Insurance STARS		
Performance Measures Tracket	d:				
Mea	sure	Approx. Value	Target Value		
Current Sub-Process Issues/P	Toblems.				
Improvement Opportunities:					
Орро	rtunity Portunity to multiple impacts)	(Individually list and desc policies [P], as well as cu	ational Impacts cribe laws [L] regulations [R], and ultural [C] considerations for each oportunity)		
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